

4. Please send the Certificate to:
Ronald W. Wangerow, Esq.
Freudenberg-NOK General Partnership
Legal Department
47690 East Anchor Court
Plymouth, MI 48170-2455
5. Please pay the fee required by 37 C.F.R. § 1.20(a)-\$100.00, as follows:
- ☐ Attached is a ☐ check ☐ money order in the amount of \$
 - ☒ Authorization is hereby made to charge the amount of \$100
 - ☒ to Deposit Account No. 08-0750
 - ☐ to Credit card as shown on the attached credit card information authorization form PTO-2038

Charge any additional fees required by this paper or credit any overpayment to Deposit Account No. 08-0750.

Respectfully submitted,

Dated: August 15, 2007

Electronic Signature: /Ryan W. Massey/
Ryan W. Massey, Reg. No. 38,543


HARNESS, DICKEY & PIERCE, P.L.C.
P.O. Box 828
Bloomfield Hills, Michigan 48303
(248) 641-1600

CORRESPONDENCE ADDRESS:

CUSTOMER NO. 29293

Freudenberg-NOK General Partnership
Legal Department
47690 East Anchor Court
Plymouth, MI 48170-2455
Ph: (734) 354-5445 / Fax: (734) 451-1445

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND				
1 Date of Request: <u>09/17/07</u>		2 Serial/Patent # <u>10/781175</u>		
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT
	Filing			\$
	Amendment			\$
	Extension of Time			\$
	Notice of Appeal/Appeal			\$
X	Petition	ifw	08/15/07	\$ 400.00
	Issue			\$
	Cert of Correction/Terminal Disc.			\$
	Maintenance			\$
	Assignment			\$
	Other			\$
			7 TOTAL AMOUNT OF REFUND	
			\$ 400.00	
10 REASON:		8 TO BE REFUNDED BY:		
		Treasury Check		
X	Overpayment	Credit Deposit A/C #:		
	Duplicate Payment	9 08--0750		
	No Fee Due (Explanation):			
credit card refund				
11 REFUND REQUESTED BY:				
TYPED/PRINTED NAME: <u>ALESIA M. BROWN</u>		TITLE: <u>ATTY</u>		
SIGNATURE: <u>/ALESIA M. BROWN/</u>		PHONE: <u>23205</u>		
OFFICE: <u>OP</u>				
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****				
APPROVED: <u></u>		DATE: <u>9/21/07</u>		

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**